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0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number C 2774 PCT/US			
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		COMPLETE IF KNOWN			
<table border="0"> <tr> <td><input checked="" type="checkbox"/> Declaration Submitted with Initial Filing</td> <td>OR</td> <td><input type="checkbox"/> Declaration Submitted after Initial Filing</td> </tr> </table>			<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing			
First Named Inventor BIEHL, Petra	Application Number	Filing Date			
Group Art Unit	Examiner Name				

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR PRODUCING A BENZOATE

the specification of which

(Title of the Invention)

specification of which
 is attached hereto

OR

was filed on (MM/DD/YYYY) **04/30/2004** as United States Application Number or PCT International

Application Number **PCT/EP2004/004589** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

<p>I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.</p> <p>I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.</p>					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
103 21 107.1	Germany	05/09/2003	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(e) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP2004/004589	04/30/2004	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name **23657** Customer Number or label

List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: Customer Number or label **23657** OR Fill in correspondence address below

Name					
Address					
Address					
City	State		Zip		
Country	Telephone		Fax		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Petra	Middle Initial		Family Name	BIEHL		Suffix e.g. Jr.		
Inventor's Signature					Date				
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Post Office Address									
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<input checked="" type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Andreas		Middle Initial		Family Name	SUESSENBACH		Suffix e.g. Jr.	
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Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
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Inventor's Signature						Date			
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Inventor's Signature						Date			
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City	41515 Grevenbroich		State		Zip		Country	Germany	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.
Inventor's Signature						Date		
Residence: City			State		Country			Citizenship
Post Office Address								
Post Office Address								
City			State		Zip	Country	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.
Inventor's Signature						Date		
Residence: City			State		Country			Citizenship
Post Office Address								
Post Office Address								
City			State		Zip	Country	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.
Inventor's Signature						Date		
Residence: City			State		Country			Citizenship
Post Office Address								
City			State		Zip	Country	Germany	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto								